Fill	in this information to identify your c	366.							
	otor 1 Christine Ma								
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	e: MIDDLE DISTRICT C	OF PENNSYLVANIA						
	1:24-BK-00746-H	IWV	-		_	eck if this is: An amende	J	postpetition c	:hanter
	" : I 5 4001						as of the follo		
	fficial Form 106l		MM / DD/ YYYY						
Be a	chedule I: Your Inc as complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	sible. If two married pec are married and not fili ir spouse is not filing w	ng jointly, and your s ith you, do not inclu	spouse i de inforr	s living wit nation abo	th you, inclu ut your spo	ude informa	ition about y e space is ne	our eeded,
Par	t 1: Describe Employment								
1.	Fill in your employment information.		Debtor 1	Debtor 1			Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed			☐ Employed ☐ Not employed			
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name	Mechanicsburg Area School District						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
	Give Details About Mor								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any line, wr	ite \$0 in the	space. Inclu	de your non-	filing
	u or your non-filing spouse have mee space, attach a separate sheet to		ombine the information	n for all e	mployers fo	or that perso	n on the line	s below. If yo	ou need
					For D	ebtor 1	For Debt		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,284.14	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$1,	284.14	\$	N/A	

Official Form 106I Schedule I: Your Income page 1 Doc 21 Filed 06/19/24 Entered 06/19/24 12:35:45 Desc Main Document Page 1 of 4 Case 1:24-bk-00746-HWV

					F	or Debtor 1		r Debtor 2 or n-filing spouse
	Сору	line 4 here		4.	\$	1,284.14	\$	N/A
5.	List a	all payroll deduct	tions:					
	5a.	Tax, Medicare, a	and Social Security deductions	5a.	\$	208.87	\$	N/A
	5b.	Mandatory cont	ributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contr	ibutions for retirement plans	5c.	\$	89.03	\$	N/A
	5d.	Required repay	ments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance		5e.	\$	0.00	\$	N/A
	5f.	Domestic suppo	ort obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues		5g.	\$	0.00	\$	N/A
	5h.	Other deduction	ns. Specify:	5h	+ \$	0.00	+ \$ _	N/A
6.	Add	the payroll deduc	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	297.90	\$_	N/A
7.	Calc	ulate total month	ly take-home pay. Subtract line 6 from line 4.	7.	\$	986.24	\$_	N/A
8.	List a 8a.	Net income from profession, or fa Attach a statemen	ent for each property and business showing gross y and necessary business expenses, and the total	s, 8a.	\$	0.00	\$	N/A
	8b.	Interest and div	idends	8b.	\$	0.00	\$	N/A
	8c.	regularly receiv Include alimony,	payments that you, a non-filing spouse, or a de e spousal support, child support, maintenance, divorproperty settlement.	-	\$	0.00	\$	N/A
	8d.	Unemployment		8d.	\$	0.00	\$	N/A
	8e.	Social Security	P. Commission of the Commissio	8e.	\$	2,676.90	\$	N/A
	8f.	Include cash ass that you receive,	ent assistance that you regularly receive sistance and the value (if known) of any non-cash as such as food stamps (benefits under the Supplemence Program) or housing subsidies.		\$	0.00	\$	N/A
	8g.	Pension or retir	ement income	8g.	\$	2,232.98	\$	N/A
	8h.	Other monthly i	ncome. Specify:	8h	+ \$	0.00	+ \$_	N/A
9.	Add	all other income.	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	4,909.88	\$_	N/A
10.	Calc	ulate monthly inc	come. Add line 7 + line 9.	10. \$		5,896.12 + \$		N/A = \$ 5,896.12
		•	10 for Debtor 1 and Debtor 2 or non-filing spouse.			- 0,000.12		- 1471
11.	State Include other	e all other regular de contributions fro friends or relative of include any amo	contributions to the expenses that you list in Some an unmarried partner, members of your househ	old, your deper		•		Schedule J. 11. +\$ 0.00
12.		that amount on th	e last column of line 10 to the amount in line 11. ne Summary of Schedules and Statistical Summary					12. \$5,896.12 Combined
13.	Do y	ou expect an inci	rease or decrease within the year after you file t	his form?				monthly income
		No.						
		Yes. Explain:						

Official Form 106I Schedule I: Your Income page 2 Case 1:24-bk-00746-HWV Doc 21 Filed 06/19/24 Entered 06/19/24 12:35:45 Desc

Fill i	n this informa	tion to identify y	our case:					
Debt	or 1	Christine Ma	rie Pompe	ei		Ch	eck if this is:	
			· ·				An amended filing	
Debt	or 2					П	A supplement sho	wing postpetition chapter
(Spo	use, if filing)					_	13 expenses as of	the following date:
Unite	ed States Bankr	uptcy Court for the	: MIDDL	E DISTRICT OF PENNSYL	_VANIA		MM / DD / YYYY	
Case	e number 1:	24-BK-00746-	HWV					
	nown)	21 51 007 10	11000					
 Of	ficial Ea	rm 106J				1		
		J: Your	Exper	nses				12/1
Be a	as complete a	and accurate as	s possible eded, atta	. If two married people ar				
Part 1.	1: Descr Is this a joir	ribe Your House nt case?	ehold					
	■ No. Go to		in a separ	ate household?				
	□и	0	•	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.	
2.		e dependents?		,	•			
	Do not list D	•	☐ Yes.	Fill out this information for	Dependent's relat	ionship to	Dependent's	Does dependent
	Debtor 2.		— 103.	each dependent	Debtor 1 or Debto		age	live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
					-			☐ Yes
3.	expenses o	oenses include f people other t d your depende	than 🦳	No Yes				
Part		ate Your Ongoi		ly Fynansas				
Esti	mate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp	ou are using this f	orm as a	supplement in a Ch	apter 13 case to report
	licable date.	d date after the	Dankrupio	y is illed. Il tills is a supp	nemental Schedule	, check	the box at the top t	of the form and the mitthe
the		h assistance an		government assistance in cluded it on <i>Schedule I:</i>)			Your exp	penses
		,				_		
4.		or home owners and any rent for th		nses for your residence. In or lot.	nclude first mortgag	e 4.	\$	350.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	265.00
	4b. Prope	rty, homeowner'	s, or renter	's insurance		4b.	\$	100.00
	4c. Home	maintenance, re	epair, and i	upkeep expenses		4c.	\$	50.00
		owner's associa				4d.	\$	45.00
5	Additional r	nortanaa navm	anta far w	our residence such as ho	ma aquitu laana	5	¢.	0.00

Official Form 106J Schedule J: Your Expenses page 1

Deb	otor 1 Christi	ne Marie Pompei	Case num	ber (if known)	1:24-BK-00746-HWV
6.	Utilities:				
	6a. Electric	ity, heat, natural gas	6a.	\$	260.00
	6b. Water,	sewer, garbage collection	6b.	\$	91.00
	6c. Telepho	one, cell phone, Internet, satellite, and cable services	6c.	\$	321.00
	6d. Other.	Specify:	6d.	\$	0.00
7.	Food and ho	usekeeping supplies	7.	\$	795.00
8.	Childcare an	d children's education costs	8.	\$	0.00
9.	Clothing, lau	ndry, and dry cleaning	9.	\$	90.00
10.	Personal car	e products and services	10.	\$	100.00
11.	Medical and	dental expenses	11.	\$	250.00
12.		on. Include gas, maintenance, bus or train fare. e car payments.	12.	\$	510.00
13.		nt, clubs, recreation, newspapers, magazines, and books	13.	·	110.00
		ontributions and religious donations	14.	·	100.00
	Insurance.	The induction of the following the induction of the induc		<u> </u>	100.00
		e insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life ins		15a.	\$	0.00
	15b. Health	insurance	15b.	\$	199.00
	15c. Vehicle	insurance	15c.	\$	267.00
	15d. Other in	nsurance. Specify:	15d.	\$	0.00
16.	Taxes. Do no	t include taxes deducted from your pay or included in lines 4 or 20.			
		deral tax withheld from pension	16.	\$	103.00
17.		r lease payments:			
		ments for Vehicle 1	17a.		445.00
		ments for Vehicle 2	17b.	·	0.00
	17c. Other.		17c.		0.00
	17d. Other.	· ·	17d.	\$	0.00
18.		nts of alimony, maintenance, and support that you did not report as		¢.	0.00
40		m your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
19.		nts you make to support others who do not live with you.	40	\$	0.00
20	Specify:	anarty ayrangaa nat inalydad in lines 4 ar E of this form ar an Cah	19.	Income	
20.		operty expenses not included in lines 4 or 5 of this form or on Sch ges on other property	20a.		0.00
	20b. Real es		20a. 20b.	· <u> </u>	0.00
		y, homeowner's, or renter's insurance	20c.		0.00
	•	nance, repair, and upkeep expenses	20d.	·	
		wner's association or condominium dues	20d. 20e.		0.00
24					0.00
۷۱.	Other: Specif	у.		+\$	0.00
22.	Calculate yo	ur monthly expenses			
	22a. Add lines	s 4 through 21.		\$	4,451.00
	22b. Copy line	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line	22a and 22b. The result is your monthly expenses.		\$	4,451.00
					-,
23.		ur monthly net income.	22	Φ.	E 000 10
		ne 12 (your combined monthly income) from Schedule I.	23a.		5,896.12
	∠3b. Copy y	our monthly expenses from line 22c above.	23b.	-\$	4,451.00
		ct your monthly expenses from your monthly income. sult is your <i>monthly net income</i> .	23c.	\$	1,445.12
24.	For example, do	ct an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you the terms of your mortgage?			ease or decrease because of a
	☐ Yes.	Explain here:			
	⊔ res.	Explain Hele.			